L	PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									Oruly255					
CLAIMS AS FILED - PART (Column 2)								•	SMALL	EMTITY	OR		R THAN ENTITY		
F	OR		NUMBER FILED			NUMBER	EXTRA		RATE	FEE	7	RATE	FEE		
В,	ASIC FEE									345.00	OR	E 10 2 3 3			
TOTAL CLAIMS			3	minus	20=	· 14			X\$ 9≖	120	OR	X\$18=			
ini	DEPENDENT C	LAIMS	4	4 minus	3 =	•			X39=	34	OR	X78=			
M	MULTIPLE DEPENDENT CLAIM PRESENT										OR	+260=			
* If the difference in column 1 is less than zero, enter *0* in column 2									+130=	30	OR	TOTAL			
	CLAIMS AS AMENDED - PART II									·	J • · ·	OTHER	THAN		
	(Column 1) (Column 2) (Column 3)									ENTITY	OR	SMALL			
AMENDMENT A		REM	AIMS AINING TER IDMENT	;» 5.	PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NON	Total	Ŀ		Minus	••		=	1	X\$ 9=	366	OR	X\$18=			
AME	Independent	•	W 05 14	Minus	0504		=	I	X39=		OR	X78=	·		
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=			
									TOTAL		OR	TOTAL ADDIT, FEE			
		(Cot	ımn 1)		(0	Column 2)	(Column 3)								
AMENDMENT 8		REM	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE.	ADDI- TIONAL FEE		
	Total	. 3	4	Minus	••	34	= /		X\$ 9=	1	OR	X\$18=	1		
	Independent		4	Minus			-		X39=	7	ОЯ	X78=	7		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=		OR	+260=			
								-	TOTAL DDIT, FEE		OR	TOTAL			
1.	(Column 2) (Column 3)										•				
AMENDMENT C		REM. AF	aims Aining Ter Dment		PP	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		18	Minus	••	74	-	r	X\$ 9=		OR	X\$18=			
	Independent	• ,	3	Minus	***	4	=	r	X39=			X78=	· ·		
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=		OR				
	' If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										ОЯ	+260=			
** 1	I the "Highest Nu I the "Highest Nu I the "Highest Nu	mber Pre	viously Pa	id For IN THI	S SPA	CE is less that	n 20, enter "20."	A	TOTAL DIT. FEE		OR A	TOTAL DOIT. FEE			

FORM PTO-675 (Rev. 12/99) **Application or Docket Number**